

**UNITED STATES COURT OF APPEALS  
FOR THE FIRST CIRCUIT**

**APPEARANCE FORM**  
(Please type or print all answers)

Case No.:  
Case Name (short):

**FAILURE TO FILL OUT COMPLETELY MAY RESULT IN THE REJECTION  
OF THIS FORM AND COULD AFFECT THE PROGRESS OF THE APPEAL**

THE CLERK WILL ENTER MY APPEARANCE AS COUNSEL ON BEHALF OF:

\_\_\_\_\_ as the  
(Specify name of person or entity represented.)

*If you represent a litigant who was a party below, but who is not a party on appeal, do not designate yourself as counsel for the appellant or the appellee.*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> appellant(s)          | <input type="checkbox"/> appellee(s)   | <input type="checkbox"/> amicus curiae |
| <input type="checkbox"/> petitioner(s)         | <input type="checkbox"/> respondent(s) | <input type="checkbox"/> intervenor(s) |
| <input type="checkbox"/> not a party on appeal |  |  |

\_\_\_\_\_  
**(Signature)**

Name & Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ **Court of Appeals Bar Number:** \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Has this case or any related case previously been on appeal?

Yes \_\_\_\_\_ Court of Appeals No. \_\_\_\_\_  
No \_\_\_\_\_

[ ] IF YOU WILL NOT BE PARTICIPATING IN THIS CASE, PLEASE CHECK HERE AND RETURN, AND GIVE US THE NAME AND ADDRESS OF ANOTHER ATTORNEY, IF ANY, WHO WILL PROVIDE APPELLATE REPRESENTATION.

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NOTE: Must be signed by an Attorney admitted to practice before the United States Court of Appeals for the First Circuit pursuant to Local Rule 46(a)(2). If you are applying for admission, please return this appearance form **with** your application for admission, including the admission fee.

If your name has changed since you were admitted to the First Circuit Bar PLEASE show the name under which you were admitted.

**COUNSEL MUST COMPLETE & RETURN THIS APPEARANCE FORM  
IN ORDER TO FILE PLEADINGS IN THIS COURT**